Consultant 14

15 September 2013

Dear Ms Hawes

I am writing in response to your provisional report on private health care and the lack of knowledge GP's have in referring to consultants.

I have been in private practice for [%] years and [%].

We take pride in our knowledge of our consultants we refer to, which has been built up over many years. We have a database of specialists [%].

One of the fundamental aims of a good private general practitioner is to refer our patients to the best specialist in the required field. In every speciality there are numerous consultants but some are extremely junior and do not have the experience required to deal with certain conditions. We like to provide our patients with the best possible service and second best is simply not good enough.

I am sure you will appreciate that if you or a member of your family had something wrong with you then you would want the best person dealing with it. Over many years, and with our very close contact with our specialists, we have the knowledge to know which consultant to use in any particular situation.

It has become apparent over the past few years that our privately insured patients are now being treated as second class citizens. Despite paying hefty premiums, they are sometimes unable to see the consultant we recommend. They are provided with a list of specialists, none of whom I have heard of but who have agreed to see patients on Bupa's terms. I will agree that the names of the consultants given to our patients are qualified and have done all the required training but in many incidences they don't have the sub specialities required to look after our patients' needs.

All of us general practitioners attend numerous meetings where we meet new consultants coming into private practice. Through our sessions with them and by referring patients to them over the years we quickly know who provides the best service.

I am in no doubt therefore we private general practitioners are in the best possible position to make the best choices for our patients and not the insurance companies. It is the role of a good general practitioner to decide what is best for their patients and not a telephonist from an insurance company. Our knowledge of our patients has been gained through looking after them for many years.

I look forward to hearing the final results of your commission.